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**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**Declaration
Submitted
With Initial
Filing

OR

Declaration
Submitted after Initial
Filing (surcharge
(37 CFR 1.16 (e))
required)

Attorney Docket Number

S7312-70443

First Named Inventor

Paul Gierow

COMPLETE IF KNOWN

Application Number

Filing Date

Art Unit

Examiner Name

I hereby declare that:

Each inventor's residence, mailing address, and citizenship are as stated below next to their name.

I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Non-Intrusive Photogrammetric Targets for Optical Shape Characterization

(Title of the Invention)

the specification of which



is attached hereto

OR



was filed on (MM/DD/YYYY)

as United States Application Number or PCT International

Application Number

and was amended on (MM/DD/YYYY)

(if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

| Prior Foreign Application Number(s) | Country | Foreign Filing Date (MM/DD/YYYY) | Priority Not Claimed | Certified Copy Attached? | |
|--|---------|-------------------------------------|--------------------------|--------------------------|--------------------------|
| | | | | Yes | No |
| | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

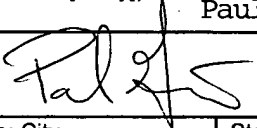
(Page 1 of 2)

This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

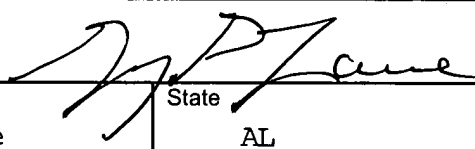
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DECLARATION — Utility or Design Patent Application

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| Name | | | |
| Address | | | |
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| Country | Telephone | Fax | |
| I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon. | | | |
| NAME OF SOLE OR FIRST INVENTOR: | | <input type="checkbox"/> A petition has been filed for this unsigned inventor | |
| Given Name (first and middle [if any]) | | Family Name or Surname | |
| Paul | | Gierow | |
| Inventor's Signature  | | | Date 9/30/03 |
| Residence: City | State | Country | Citizenship |
| Madison | AL | USA | US |
| Mailing Address | | | |
| SRS Technologies, Inc., Cummings Research West, 500 Discovery Dr., N.W. | | | |
| City | State | ZIP | Country |
| Huntsville | AL | 35806 | USA |
| NAME OF SECOND INVENTOR: | | <input type="checkbox"/> A petition has been filed for this unsigned inventor | |
| Given Name (first and middle [if any]) | | Family Name or Surname | |
| Inventor's Signature | | Date | |
| Residence: City | State | Country | Citizenship |
| Mailing Address | | | |
| City | State | ZIP | Country |
| <input type="checkbox"/> Additional inventors or a legal representative are being named on the _____ supplemental sheet(s) PTO/SB/02A or 02LR attached hereto. | | | |

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DECLARATION — Utility or Design Patent Application

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| NAME OF SOLE OR FIRST INVENTOR: | | <input type="checkbox"/> A petition has been filed for this unsigned inventor | |
| Given Name (first and middle [if any]) <div style="text-align: center;">Greg</div> | | Family Name or Surname <div style="text-align: center;">Laue</div> | |
| Inventor's Signature  | | | Date <div style="text-align: center;">10/1/03</div> |
| Residence: City Huntsville | State AL | Country USA | Citizenship US |
| Mailing Address SRS Technologies, Inc., Cummings Research West, 500 Discovery Dr., N.W. | | | |
| City Huntsville | State AL | ZIP 35806 | Country USA |
| NAME OF SECOND INVENTOR: | | <input type="checkbox"/> A petition has been filed for this unsigned inventor | |
| Given Name (first and middle [if any]) | | Family Name or Surname | |
| Inventor's Signature | | | Date |
| Residence: City | State | Country | Citizenship |
| Mailing Address | | | |
| City | State | ZIP | Country |
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| NAME OF SOLE OR FIRST INVENTOR: | | <input type="checkbox"/> A petition has been filed for this unsigned inventor | |
| Given Name (first and middle [if any]) William | | Family Name or Surname Clayton | |
| Inventor's Signature <i>William R. Clayton</i> | | | Date 9-26-03 |
| Residence: City Huntsville | State AL | Country USA | Citizenship US |
| Mailing Address SRS Technologies, Inc., Cummings Research West, 500 Discovery Dr., N.W. | | | |
| City Huntsville | State AL | ZIP 35806 | Country USA |
| NAME OF SECOND INVENTOR: | | <input type="checkbox"/> A petition has been filed for this unsigned inventor | |
| Given Name (first and middle [if any]) | | Family Name or Surname | |
| Inventor's Signature | | | Date |
| Residence: City | State | Country | Citizenship |
| Mailing Address | | | |
| City | State | ZIP | Country |
| <input type="checkbox"/> Additional inventors or a legal representative are being named on the _____ supplemental sheet(s) PTO/SB/02A or 02LR attached hereto. | | | |

PTO/SB/01 (08-03)

Approved for use through 07/31/2006. OMB 0651-0032

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DECLARATION — Utility or Design Patent Application

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| Name | | | |
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| Country | Telephone | Fax | |
| I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon. | | | |
| NAME OF SOLE OR FIRST INVENTOR: | | <input type="checkbox"/> A petition has been filed for this unsigned inventor | |
| Given Name (first and middle (if any)) David Michael | | Family Name or Surname Murphy | |
| Inventor's Signature <i>D. Murphy</i> | | Date Oct 1 '03 | |
| Residence: City Huntsville | State AL | Country USA | Citizenship US |
| Mailing Address 621 Ricardo Ave Santa Barbara, CA 93109 SRS Technologies, Inc., Cummings Research West, 500 Discovery Dr., N.W. | | | |
| City Huntsville | State AL | ZIP 35806 | Country USA |
| NAME OF SECOND INVENTOR: | | <input type="checkbox"/> A petition has been filed for this unsigned inventor | |
| Given Name (first and middle (if any)) | | Family Name or Surname | |
| Inventor's Signature | | Date | |
| Residence: City | State | Country | Citizenship |
| Mailing Address | | | |
| City | State | ZIP | Country |
| <input type="checkbox"/> Additional inventors or a legal representative are being named on the supplemental sheet(s) PTO/SB/02A or 02LR attached hereto. | | | |

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PTO/SB/81 (02-01)

Approved for use through 10/31/2002. OMB 0651-0035

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POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

| | |
|------------------------|------------------------------|
| Application Number | |
| Filing Date | |
| First Named Inventor | Paul Gierow |
| Title | Non-Intrusive Photogrametric |
| Group Art Unit | |
| Examiner Name | |
| Attorney Docket Number | S7312-70443 |

I hereby appoint:

☒ Practitioners at Customer Number

32009

OR

☐ Practitioner(s) named below:

| Name | Registration Number |
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Fax

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Name

Paul Gierow

Signature

Paul Gierow

Date

9/30/03

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☐ *Total of _____ forms are submitted.

Burden Hour Statement: This form is estimated to take 3 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

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POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

| | |
|------------------------|------------------------------|
| Application Number | |
| Filing Date | |
| First Named Inventor | William Clayton |
| Title | Non-Intrusive Photogrametric |
| Group Art Unit | |
| Examiner Name | |
| Attorney Docket Number | S7312-70443 |

I hereby appoint:

☒ Practitioners at Customer Number

32009

OR

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SIGNATURE of Applicant or Assignee of Record

Name

William Clayton

Signature

William R. Clayton

Date

9-26-03

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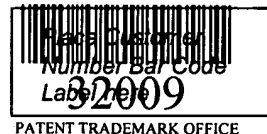
POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

| | |
|------------------------|-------------------------------|
| Application Number | |
| Filing Date | |
| First Named Inventor | Greg Laue |
| Title | Non-Intrusive Photogrammetric |
| Group Art Unit | |
| Examiner Name | |
| Attorney Docket Number | S7312-70443 |

I hereby appoint:

☒ Practitioners at Customer Number

32009



☐ Practitioner(s) named below:

| Name | Registration Number |
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SIGNATURE of Applicant or Assignee of Record

Name

Greg Laue

Signature

Date

10/1/03

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PT /SB/81 (02-01)

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**POWER OF ATTORNEY OR
AUTHORIZATION OF AGENT**

Application Number

Filing Date

First Named Inventor

David Murphy

Title

Non-Intrusive Photogrammetric

Group Art Unit

Examiner Name

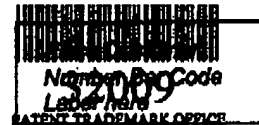
Attorney Docket Number

S7312-70443

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32009

☐ Practitioner(s) named below:

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SIGNATURE of Applicant or Assignee of Record

Name

David Murphy

Signature



Date

Oct 1 '03

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